

MOR-1

CASE NAME: Saldivar Home Health, Inc.
CASE NUMBER: 16-52586
PROPOSED PLAN DATE: 11/30/2016

UNITED STATES BANKRUPTCY COURT

PETITION DATE: 11/16/2016
DISTRICT OF TEXAS:
DIVISION:

MONTHLY OPERATING REPORT SUMMARY FOR MONTH January YEAR 2017

MONTH	Nov-16	Dec-16	Jan-17	2016
REVENUES (MOR-6)	152,012.00	180,133.30	142,125.10	0.00
INCOME BEFORE INT; DEPREC/TAX (MOR-6)	-59,967.00	-116,686.23	-64,570.86	0.00
NET INCOME (LOSS) (MOR-6)	-59,967.00	-116,686.23	-64,570.86	0.00
PAYMENTS TO INSIDERS (MOR-9)	7,659.00	16,162.00	16,162.00	0.00
PAYMENTS TO PROFESSIONALS (MOR-9)	0.00	0.00	0.00	0.00
TOTAL DISBURSEMENTS (MOR-7)	211,979.00	296,819.53	206,695.96	0.00
				2,502,929.00

The original of this document must be filed with the United States Bankruptcy Court and a copy must be sent to the United States Trustee

REQUIRED INSURANCE MAINTAINED AS OF SIGNATURE DATE	EXP. DATE	
CASUALTY	YES () NO () YES () NO () YES () NO () YES () NO X YES () NO X	4/27/2017 4/27/2017 8/22/2017 - - - - - -
LIABILITY		
VEHICLE		
WORKERS		
OTHER		

CIRCLE ONE Are all accounts receivable being collected within terms?	
<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Are all post-petition liabilities, including taxes, being paid within terms?	
<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Have any pre-petition liabilities been paid?	
If so, describe	
Are all funds received being deposited into DIP bank accounts?	
<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Were any assets disposed of outside the normal course of business?	
<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
If so, describe	
Are all U.S. Trustee Quarterly Fee Payments current?	
<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
What is the status of your Plan of Reorganization?	

ATTORNEY NAME: Dean W. Green, Attorney at Law
FIRM NAME: 2929 Messick, Suite 117
ADDRESS: San Antonio, Texas 78230
CITY, STATE, ZIP: 210 343-7100
TELEPHONE/FAX: 210 343-3433 FAX
MOR-1

I certify under penalty of perjury that the following complete
Monthly Operating Report (MOR), consisting of MOR-1 through
MOR-9 plus attachments, is true and correct.

SIGNED X Dean W. Green TITLE: C.O.O.

(ORIGINAL SIGNATURE)
Dean W. Green DATE 3/13/2017
(PRINT NAME OF SIGNATORY) DATE Revised 07/01/98

COMPARATIVE BALANCE SHEETS

ASSETS	FILING DATE*	MONTH		MONTH		MONTH	
		11/30/2016 0:00	12/31/2016 0:00	1/31/2017 0:00	1/31/2017 0:00	1/31/2017 0:00	1/31/2017 0:00
CURRENT ASSETS							
Cash		75,079.00	75,078.73	64,242.13			
Accounts Receivable, Net		<u>319,134.00</u>	189,562.00	198,562.00			
Inventory: Lower of Cost or Market		0.00					
Prepaid Expenses		0.00					
Investments		0.00					
Other		0.00					
TOTAL CURRENT ASSETS		284,213.00	264,640.73	262,804.13			
PROPERTY, PLANT & EQUIP. @ COST		704,725.00	704,725.00	704,725.00			
Less Accumulated Depreciation		631,879.00	631,879.00	631,879.00			
NET BOOK VALUE OF PP & E		<u>72,846.00</u>	<u>72,846.00</u>	<u>72,846.00</u>			
OTHER ASSETS							
1. Tax Deposits							
2. Investments in Subsidiaries							
3. Electric Deposit							
4.							
TOTAL ASSETS		<u>\$0.00</u>	<u>\$357,059.00</u>	<u>\$337,486.73</u>	<u>\$335,650.13</u>	<u>\$0.00</u>	<u>\$0.00</u>

* Per Schedules and Statement of Affairs

MOR-2

Revised 07/01/98

COMPARATIVE BALANCE SHEETS

		MONTH			MONTH			MONTH			MONTH		
		FILING DATE*	MONTH	MONTH	12/31/2016 0:00	MONTH	MONTH	1/31/2017 0:00	MONTH	MONTH	1/31/2017 0:00	MONTH	
LIABILITIES & OWNER'S EQUITY		11/16/2016 0:00	11/30/2016 0:00										
LIABILITIES													
POST-PETITION LIABILITIES(MOR-4)			3,119,536.41		3,119,536.41			3,119,536.41					
PRE-PETITION LIABILITIES													
Notes Payable - Secured		14,149.38		14,149.38			14,149.38						
Priority Debt													
Federal Income Tax		285,916.00		323,802.96			360,086.38						
FICA/Withholding													
Unsecured Debt													
Other		0.00	300,065.38		337,952.34		374,235.76		0.00		0.00		
TOTAL PRE-PETITION LIABILITIES		0.00	3,419,601.79		3,457,488.75		3,493,772.17		0.00		0.00		
TOTAL LIABILITIES													
OWNER'S EQUITY (DEFICIT)													
PREFERRED STOCK													
COMMON STOCK		1,000.00		1,000.00		1,000.00							
ADDITIONAL PAID-IN CAPITAL													
RETAINED EARNINGS: Filing Date		-234,135.00		-234,135.00		-234,135.00							
RETAINED EARNINGS: Post Filing Date		-234,135.00		-59,967.00		-59,967.00		-59,967.00		-59,967.00		-59,967.00	
TOTAL OWNER'S EQUITY (NET WORTH)		0.00	-467,270.00	-293,102.00	-293,102.00	-293,102.00	-293,102.00	-293,102.00	-59,967.00	-59,967.00	-59,967.00	-59,967.00	
TOTAL LIABILITIES & OWNERS EQUITY		\$0.00	\$2,952,331.79	\$3,164,386.75	\$3,200,670.17	\$3,200,670.17	\$3,200,670.17	\$3,200,670.17	(\$59,967.00)	(\$59,967.00)	(\$59,967.00)	(\$59,967.00)	

* Per Schedules and Statement of Affairs

CASE NAME: Saldivar Home Health, Inc.
CASE NUMBER: 16-52586

SCHEDULE OF POST-PETITION LIABILITIES

	MONTH 11/30/2016	MONTH 12/31/2016	MONTH 1/31/2017	MONTH	MONTH
TRADE ACCOUNTS PAYABLE	3,119,536.41	3,119,536.41	3,119,536.41		
TAX PAYABLE					
Federal Payroll Taxes	285,916.00	323,802.96	360,086.38		
State Payroll Taxes					
Ad Valorem Taxes					
Other Taxes					
TOTAL TAXES PAYABLE	285,916.00	323,802.96	360,086.38	0.00	0.00
SECURED DEBT POST-PETITION					
ACCURED INTEREST PAYABLE					
ACCRUED PROFESSIONAL FEES*					
OTHER ACCRUED LIABILITIES					
1.					
2.					
3.					
TOTAL POST-PETITION LIABILITIES (MOR-3)	\$3,419,601.79	\$3,457,488.75	\$3,493,772.17	\$0.00	\$0.00

*Payment requires Court Approval

MOR-4

Revised 07/01/98

CASE NAME: Saldivar Home Health, Inc.
CASE NUMBER: 16-52586

AGING OF POST-PETITION LIABILITIES
MONTH
November - January 2017

MONTH	TOTAL	TRADE ACCOUNTS	FEDERAL TAXES	STATE TAXES	AD VALOREM, OTHER TAXES	OTHER
0-30	0.00					
31-60	0.00					
61-90	0.00					
91+	3,839,709.17	3,479,622.79	360,086.38	\$360,086.38	\$0.00	\$0.00
TOTAL	\$3,839,709.17	\$3,479,622.79				

AGING OF ACCOUNTS RECEIVABLE

MONTH	11/30/2016	12/31/2016	1/31/2017
0-30 DAYS	141,095.15	196,321.55	188,546.23
31-60 DAYS	52,476.67	47,965.23	39,658.21
61-90 DAYS	19,632.49	16,235.66	13,569.28
91+ DAYS	12,053.80	10,123.33	9,689.23
TOTAL	\$225,258.11	270,645.77	\$0.00
			\$0.00

MOR-5

Revised 07/01/98

CASE NAME: Saldivar Home Health, Inc.
CASE NUMBER: 16-52586

STATEMENT OF INCOME (LOSS)

	MONTH	MONTH	MONTH	MONTH	MONTH	MONTH	MONTH	FILING TO DATE
REVENUES (MOR-1)	11/30/2016							152,012.00
TOTAL COST OF REVENUES	152,012.00							90,626.00
GROSS PROFIT	90,626.00							61,386.00
OPERATING EXPENSES:								
Selling & Marketing								0.00
General & Administrative								0.00
Insiders Compensation	8,082.00							8,082.00
Professional Fees								0.00
Other	113,271.00							113,271.00
Other								0.00
TOTAL OPERATING EXPENSES	121,353.00							121,353.00
INCOME BEFORE INT. DEPT/TAX (MOR-1)	-59,967.00							-59,967.00
INTEREST EXPENSE								0.00
DEPRECIATION								0.00
OTHER (INCOME) EXPENSE*								0.00
OTHER ITEMS**								0.00
TOTAL INT. DEPT & OTHER ITEMS	0.00							0.00
NET INCOME BEFORE TAXES	-59,967.00							-59,967.00
FEDERAL INCOME TAXES								0.00
NET INCOME (LOSS) (MOR-1)	(\$59,967.00)							(\$59,967.00)

Accrual Accounting Required, Otherwise Footnote with Explanation.

* *Footnote Mandatory.*

** *Unusual and/or infrequent item(s) outside the ordinary course of business requires footnote.*

CASE NAME: Saldivar Home Health, Inc.
CASE NUMBER: 16-52586

CASH RECEIPTS AND DISBURSEMENTS		MONTH	MONTH	MONTH	MONTH	MONTH	FILING TO DATE
1. CASH-BEGINNING OF MONTH		\$63,829.00	\$75,079.00	\$75,079.00	\$75,079.00	\$75,079.00	\$63,829.00
RECEIPTS:							
2. CASH SALES							0.00
3. COLLECTION OF ACCOUNTS RECEIVABLE							0.00
4. LOANS & ADVANCES (attach list)							0.00
5. SALE OF ASSETS							0.00
6. OTHER (attach list)							0.00
TOTAL RECEIPTS**		190,647.00	0.00	0.00	0.00	0.00	0.00
(Withdrawal) Contribution by Individual Debtor MFR-2*							
DISBURSEMENTS:							
7. NET PAYROLL		115,765.00					115,765.00
8. PAYROLL TAXES PAID		0.00					0.00
9. SALES, USE & OTHER TAXES PAID							0.00
10. SECURED/RENTAL/LEASES							0.00
11. UTILITIES & TELEPHONE							0.00
12. INSURANCE							0.00
13. INVENTORY PURCHASES							0.00
14. VEHICLE EXPENSES							0.00
15. TRAVEL & ENTERTAINMENT							0.00
16. REPAIRS, MAINTENANCE & SUPPLIES							0.00
17. ADMINISTRATIVE & SELLING							0.00
18. OTHER (attach list)		63,633.00					63,633.00
TOTAL DISBURSEMENTS FROM OPERATIONS		179,398.00	0.00	0.00	0.00	0.00	179,398.00
19. PROFESSIONAL FEES							0.00
20. U.S. TRUSTEE FEES							0.00
21. OTHER REORGANIZATION EXPENSES (attach list)							0.00
TOTAL DISBURSEMENTS**		179,398.00	0.00	0.00	0.00	0.00	179,398.00
22. NET CASH FLOW		11,250.00	0.00	0.00	0.00	0.00	-179,398.00
23. CASH - END OF MONTH (MOR-2)		\$75,079.00	\$75,079.00	\$75,079.00	\$75,079.00	\$75,079.00	(\$115,569.00)

* Applies to Individual debtors only

**Numbers for the current month should balance (match)
RECEIPTS and CHECKS/OTHER DISBURSEMENTS lines on MOR-8

MOR-7

Revised 07/01/98

CASE NAME: Saldivar Home Health, Inc.
CASE NUMBER: 16-52586

CASH ACCOUNT RECONCILIATION
MONTH OF 11/30/2016

BANK NAME	Texas Champion Bank	#		
ACCOUNT NUMBER	# 101027006			
ACCOUNT TYPE	OPERATING		PAYROLL	TAX
BANK BALANCE	75,078.73			\$75,078.73
DEPOSITS IN TRANSIT	30,850.01			\$30,850.01
OUTSTANDING CHECKS	-118,238.41			(\$118,238.41)
ADJUSTED BANK BALANCE	(\$12,309.67)	\$0.00		\$0.00
BEGINNING CASH - PER BOOKS	11,249.25			\$11,249.25
RECEIPTS*	190,647.00			\$190,647.00
TRANSFERS BETWEEN ACCOUNTS (WITHDRAWAL) OR CONTRIBUTION BY INDIVIDUAL DEBTOR MFR-2				\$0.00
CHECKS/OTHER DISBURSEMENTS*	179,398.00			\$179,398.00
ENDING CASH - PER BOOKS	\$22,498.25	\$0.00		\$22,498.25

MOR-8

Revised 11/11/98

*Numbers should balance (match) TOTAL RECEIPTS and
TOTAL DISBURSEMENTS lines on MOR-7

CASE NAME: Saldivar Home Health, Inc.
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PAYMENTS TO INSIDERS AND PROFESSIONALS

Of the total disbursements shown for the month, list the amount paid to insiders (as defined in Section 101(31)(A)-(F) of the U.S. Bankruptcy Code) and the professionals. Also, for insiders, identify the type of compensation paid (e.g., salary, commission, bonus, etc.) (Attach additional pages as necessary).

INSIDERS: NAME/COMP	TYPE	MONTH	MONTH	MONTH	MONTH	MONTH
		11/30/2016				
1. Margot Saldivar	7,454.00					
2. Robert Saldivar	8,708.00					
3.						
4.						
5.						
6.						
TOTAL INSIDERS (MOR-1)	\$16,162.00		\$0.00	\$0.00	\$0.00	\$0.00

PROFESSIONALS	MONTH	MONTH	MONTH	MONTH	MONTH	MONTH
1.						
2.						
3.						
4.						
5.						
6.						
TOTAL PROFESSIONALS (MOR-1)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

MOR-9

Revised 07/01/98